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# Navigating Shadows: The Impact of Social Stigma on the Mental Health of the Transgender Community in South Asia

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## Abstract

*This qualitative study explores the intricate relationship between social stigma and mental health among the transgender community in Lahore, Pakistan, and Delhi, India. Through 16 in-depth interviews, the research employs thematic analysis to uncover the core themes that emerge from the personal narratives of transgender individuals in these culturally diverse yet challenging environments. The thematic analysis revealed several key themes: the pervasive impact of societal rejection, the psychological toll of discrimination, resilience in the face of adversity, and the quest for identity and acceptance. Participants' accounts vividly portray the harsh realities of living as a transgender individual in societies where deep-seated stigma is prevalent. Many described experiences of ostracization from family and community, leading to feelings of isolation and psychological distress. The stigma associated with their gender identity often resulted in discrimination in various spheres of life, including employment, healthcare, and social interactions, further exacerbating their mental health challenges. Despite these adversities, a recurring theme of resilience emerged. Participants shared coping strategies and support systems that helped them navigate these challenges. The stories highlighted not only their struggles but also their strength and determination to live authentically. This study sheds light on the urgent need for societal change and policy reform to support the mental health and well-being of the transgender community in Lahore and Delhi. The findings provide valuable insights for mental health professionals, policymakers, and advocates, emphasizing the importance of creating inclusive and supportive environments that respect and affirm transgender identities.*

***Keywords:*** *Transgender, social stigma, mental well-being, discrimination, inclusive policies, stereotypes.*

## Introduction

The transgender community, often marginalized and stigmatized, faces unique mental health challenges that are intricately linked to their social experiences and identity formation. Globally, transgender individuals encounter a myriad of adversities, ranging from societal rejection to institutionalized discrimination, significantly impacting their

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mental well-being (Bockting, 2014; Fredriksen-Goldsen et al., 2013). In South Asian contexts, particularly in Pakistan and India, these challenges are compounded by cultural, religious, and societal norms that frequently ostracize transgender individuals, pushing them to the peripheries of society (Bhattacharya & Ghosh, 2020).

The intersection of cultural stigma, lack of social support, and limited access to healthcare resources contributes to a heightened risk of mental health issues among transgender individuals in these regions (Davidson, 2015; Valentine & Shipherd, 2018). Despite increasing global awareness and advocacy for transgender rights, the South Asian transgender community continues to grapple with unique socio-cultural barriers that exacerbate their mental health struggles.

The prevailing culture of transphobia in Pakistan and India poses serious and significant challenges for the transgender community (Akhtar et al., 2021; Niciza et al., 2023). These challenges include a lack of basic human rights, insufficient access to healthcare and education, gender discrimination, harassment, poverty and social exclusion, often manifesting in forms such as bullying. .

According to Testa et al. (2012), violence can come from various sources such as family members, strangers and acquaintances, while discrimination can take place in various contexts such as employment and property inheritance. Despite the granting of civic identity, transgender people in Pakistan and India remain susceptible to verbal and psychological abuse from medical personnel.

Based on the existing literature, this study aims to achieve two main objectives. First, to shed light on the many challenges faced by the transgender community that are still overlooked by government and local society. Second, to better understand and expand support for the transgender community. Despite the existence of several NGOs working for human rights, the transgender community has been largely ignored. Research findings reveal that transgender people in Pakistan and India are systematically ignored in various aspects of life, including education, government jobs, healthcare and security, resulting in significant rejection and discrimination.

According to Grant et al. (2011), transgender people are vulnerable to severe violence, in addition to experiencing significant and harmful microaggressions and transphobic bias. Lombardi et al. (2001) conducted a study to investigate the prevalence of violence and discrimination against transgender people. The research found that 60% of respondents said they had been harassed by strangers on the street, verbal abuse, assault with a weapon and/or sexual assault. In addition, more than a third (37%) of respondents reported experiencing discriminatory treatment at work, such as being downgraded, treated unfairly, fired and suffering economic hardship as a result (Hill & Willoughby, 2005).

Numerous studies have highlighted the lack of attention given to issues related to human rights disparity, stigma, gender-based violence and discrimination against transgender people, with significant negative impacts on their life. Despite efforts to address these issues, transgender people still face discrimination and violence.

Writings citing significant aspects of transgender people to the world in general and Pakistan in particular are limited because the population considers transgendering to be a psychological/emotional disorder caused by environmental and psychological factors, due to personality conflicts.

Research Objectives

The study is aimed to achieve the following research objectives:

1. To find out how the prevailing culture of transphobia in Pakistan and India affects the transgender community, focusing on its impact on their mental health and well-being.

2. To identify the barriers faced by the transgender community in accessing fundamental human rights, including healthcare, education, and legal recognition.

3. To analyze the types and sources of discrimination and violence faced by transgender individuals, both in public spaces and within familial settings.

4. To assess the interactions of transgender individuals with healthcare systems, particularly focusing on experiences of verbal and psychological abuse from medical personnel.

5. To Investigate Social and Economic Exclusion: Study the extent of social and economic exclusion faced by the transgender community, including challenges in employment, housing, and social acceptance.

6. To evaluate the effectiveness of current support systems like NGOs and government initiatives aimed at supporting the transgender community, identifying gaps and areas for improvement.

7. To develop recommendations for policy and practice based on the findings and propose actionable recommendations for policymakers, healthcare providers, and civil society organizations to better support the transgender community in Pakistan and India.

Significance and Rationale

This research aims to delve into the mental well-being of the transgender community in Lahore, Pakistan, and Delhi, India, offering a comparative perspective on the impact of social stigma on their mental health. The significance of this study lies in its focus on a region where transgender individuals are often overlooked in mental health discourse and research. By conducting in-depth interviews, this study seeks to uncover the nuanced experiences of transgender individuals, providing a platform for their voices and stories to be heard and understood.

The rationale for this research is rooted in the need to address the gap in literature regarding the mental health of transgender individuals in South Asian contexts. Previous studies have predominantly focused on Western populations, leaving a dearth of information about the experiences of transgender individuals in low- and middle-income countries like Pakistan and India (Scheim, Bauer, & Shokoohi, 2021; Chávez-Baray et al., 2022). This research aims to contribute to the existing body of knowledge by exploring the specific challenges and resilience of the transgender community in these regions, thereby informing culturally sensitive mental health interventions and policies.

In summary, this research is significant as it not only contributes to the broader understanding of transgender mental health but also highlights the specific challenges faced by the transgender community in Pakistan and India. It underscores the urgent need for inclusive and culturally competent mental health services and policies that cater to the unique needs of this marginalized group.

## Literature Review

In the realm of transgender rights and mental health, the existing literature reveals a complex and challenging landscape, particularly in the South Asian context of Pakistan and India. This research delves into the multifaceted issues faced by the transgender community, a group often marginalized and subjected to systemic transphobia. Studies such as those by Akhtar et al. (2021) have highlighted the dire consequences of this marginalization, including restricted access to essential services like healthcare and education, and pervasive social and economic exclusion. The work of Testa et al. (2012) further underscores the prevalence of violence and discrimination against transgender individuals, emanating from various societal segments, including family, acquaintances, and institutional structures. This literature review aims to synthesize these findings,

providing a comprehensive understanding of the challenges faced by the transgender community in these regions, and setting the stage for a deeper exploration into their experiences and the efficacy of existing support systems

Despite the fact that issues affecting transgender people are generally little addressed in federal policies, it must be recognized that some progress has been made across the Ontario government in amending the human rights code in order to establish legal protection against discrimination of gender identity and expression. However, transgender people still face serious inequities in mental well-being, including several mental health barriers, and urgently calls for real inclusion of this group in future mental health policies (Suleman & Rahman, 2020; Suleman & Mohamed, 2019).

In this context, a large body of research has demonstrated the link between being transgender and the risk of developing depressive and/or anxious symptoms (Budge et al., 2013; Rotondi et al., 2011). More recently, some studies have identified protective factors likely to counter this risk. Social support and a sense of belonging have thus been highlighted and presented as important resources for transgender people (Barr et al., 2016; Pflum et al., 2015; Puckett et al., 2019). Therefore, feeling supported and socially integrated makes it possible to limit the risk of developing symptoms linked to depression or an anxiety disorder in transgender people (Bockting et al., 2013; Budge et al., 2013; Moody et al., 2015; Singh et al., 2011).

In different parts of the world it has different names, worldwide is labeled as transgender, transsexual, intersex, non-binary, genderqueers, hermaphrodite, eunuch, khansa, mukhannath, etc. Due to their particular physical characteristics, they are given less importance in most societies. The transgender is born with biological deficiencies due to the mixing of male and female faces. Being transgender at birth is one of the most horrifying dilemmas for any parent (Kessler, 1998). Transgender has been accepted and recognized in Islamic jurisdictions around the world. According to Islamic scholars, the largest number of Muslims in the world are found in India and Pakistan and the Quran clearly establishes the principle of equality among all humans (Saiya, 2019; Suleman, Mohamed & Ahmmed, 2020; Suleman et al., 2023). On the other hand, transgender inequality is the unequal protection that transgender people receive at work, in school, and in the behavior of society in general. Transgender people regularly face transphobic harassment .

Whenever a new baby comes to life, begins to breathe, makes an entity as an individual, the first thing that needs to be clarified is their gender identity/sexual identity which is basically defined by anatomy and physiology of his body (Fausto-Sterling, Anne, 2000; Laqueur, 1992; Bilodeau & Renn, 2005).

Transgender people have a gender identity or gender expression that differs from the sex they were assigned at birth. At first glance, families become hyperactive to kill them or throw them out of their surroundings because they feel ashamed to have a family part. Whereas a child born as intersex has genitalia of both sexes but neither the penis has developed to full length nor, in case of a vagina, has reached full capacity. Some researchers explain it as (1) individuals are psychosexually neutral at birth, and (2) healthy psychosexual development depends on the appearance of the genitals."

Psychological risk in transgender populations has been directly linked to stresses resulting from society's intolerant and even aggressive attitude toward transgender people (Clements - Nolle et al., 2006; Goldblum et al., 2012; Kenagy & Bostwick , 2005; Testa et al., 2012). Additionally, there are significant barriers to accessing general medical and mental health services (Bradford, Xavier, Hendricks, Rives, & Honnold, 2007; Grant et al., 2011; Lombardi et al., 2001). Transgender people typically face discrimination when seeking employment and are forced to beg, dance or engage in prostitution to earn money.

The transgender community normally faces the following psychosocial threats from society such as rejection, secrecy, fear, physical torture and mental abuse, keeping them in an inert atmosphere leading them to suicidal thoughts. The dangers facing the transgender community are not limited to those caused by family or peers, but they face a range of dangers caused by the police, higher official authorities and even religious communities (Suleman et al., 2021). This article revolves around the social exclusion of the hijra. Transgender people have very common experiences of social rejection and violence; these factors are strong predictors of distress and mental illness. Additionally, there are virtually no anti-discrimination laws in place to ensure equal access to health care. Transgender people are also deprived of the right to health care. In June 2016, Alisha, a 23-year-old transgender activist, died because she did not receive timely medical treatment. Hospital staff were unable to decide whether to admit her to the male or female ward and let her die in the hospital.

Current literature consistently reveals alarming rates of distress and mental health problems among transgender populations (Haas et al., 2011; Mujtaba et al., 1997; Singer & Deschamps, 2017). Recent research has found that 38-83% of transgender people report having suicidal thoughts (Grossman & D' Augelli , 2007; Testa et al., 2012; Xavier et al., 2005) and about a third of participants report that they have made one or more suicide attempts in their lifetime (Hass et al., 2011; Risser et al., 2005; Testa et al., 2012). Additionally, transgender people are at higher risk for alcohol and illicit substance abuse (Risser et al., 2005; Testa et al., 2012; Xavier et al., 2005).

Research on transgender issues in psychology has primarily focused on mental health issues that disproportionately affect the transgender community, including alarming rates of suicidal ideation, suicide attempts, and substance abuse. The transgender community is physically, verbally and sexually abused. Extreme social exclusion diminishes self-esteem and sense of social responsibility. The reluctance of qualified physicians to prescribe hormone therapy forces many transgender people to self-administer hormones. The lack of national guidelines on gender transition services and ambiguous legal status services should be provided by health professionals create chaos. The need to provide free or affordable gender transition services in public hospitals, to develop national guidelines on gender transition, and to equip health care providers to provide gender transition services technically and culturally competent.

Mental Wellbeing and Social Stigma

The literature on the mental well-being of the transgender community, particularly in the context of social stigma, presents a multifaceted view of the challenges and resilience within this group. A significant body of research has focused on understanding the impact of stigma on the mental health of transgender individuals, revealing both the depth of the challenges faced and the potential pathways for support and resilience.

Bockting (2014) emphasizes the critical role of stigma in shaping the identity development of transgender individuals. This stigma often manifests as societal, familial, and internalized negative perceptions, significantly contributing to psychological distress. However, Bockting also notes that protective factors such as family support, identity pride, and a supportive peer network can mitigate these adverse effects, suggesting avenues for intervention and support.

In a study focusing on older adults within the transgender community, Fredriksen-Goldsen et al. (2013) found that this demographic is particularly vulnerable to poor physical health, disability, depressive symptoms, and stress. The research highlights the importance of addressing stigma, victimization, and enhancing social support as key strategies to improve the health outcomes of older transgender adults. Tan et al. (2020) explored the impact of enacted stigma on mental health outcomes in the transgender community in Aotearoa/New Zealand. Their findings suggest that lower levels of enacted

stigma, coupled with access to protective factors, can significantly reduce life-threatening mental health outcomes for transgender people.

The transformative power of identity affirmation is explored by Bockting & Cesaretti (2001), who discuss how transgender individuals are increasingly turning stigma into pride. This transformation involves integrating body and spirit, often facilitated by mental health practitioners and spiritual counselors, highlighting an important aspect of transgender resilience and identity affirmation. Davidson (2015) sheds light on the specific health needs and social stigma faced by transgender individuals in Canada. The study underscores the impact of social stigma on both physical and mental well-being, calling for targeted health interventions and societal change to address these challenges.

In the United States, Valentine & Shipherd (2018) examine the elevated mental health issues among transgender and gender non-conforming individuals, attributing these to social stressors. They emphasize the importance of social support, community connectedness, and effective coping strategies in mitigating these stressors. Bockting et al. (2013) further explore the relationship between social stigma and psychological distress, finding a positive association between the two. Interestingly, their research also indicates that peer support can moderate the impact of stigma on psychological distress, suggesting the importance of community and peer networks in supporting transgender individuals.

Qualter et al. (2022) delve into the broader implications of structural stigma on the mental health and well-being of LGBTQ+ individuals, including transgender people. Their research highlights how structural stigma impairs social capital and exacerbates loneliness, pointing to the need for systemic change to address these issues. Scheim et al. (2021) focus on health disparities among transgender adults in the US, noting the influence of gender affirmation, stigma, and public policies on physical and mental health, as well as access to healthcare. This study underscores the need for inclusive policies and healthcare practices that recognize and address the unique needs of the transgender community. Likewise Chávez-Baray et al. (2022) introduce an innovative approach using Photo voice methodology to empower migrant transgender women of color in assessing their health needs. This participatory research method highlights the challenges related to mental health, migration, stigma, discrimination, and the impacts of COVID-19, offering a unique perspective on the health needs of this subgroup within the transgender community.

Lastly, Bhattacharya & Ghosh (2020) discuss the mental health challenges faced by gender-diverse communities in India. They emphasize the importance of addressing social and structural barriers to healthcare, advocating for targeted interventions and government advocacy to improve mental health outcomes.

Collectively, these studies provide a comprehensive overview of the challenges faced by the transgender community in terms of mental health and social stigma. They also offer insights into the resilience of this community and potential strategies for support, intervention, and policy change.

Intimidation and Mental Wellbeing

Several victimization studies have found that people of sexual and gender diversity are at increased risk of victimization, both online and in person. Transgender people experience significant impacts from bullying, including being more likely to experience mental or behavioral problems. The repercussions of bullying can affect their mental, emotional and physical health. Both the short-term and long-term effects can impact your social life and emotional well-being and, in some cases, lead to physical injury or death. It can also have a negative effect on human psychology, such as anxiety, depression, stress, anger, and low self-esteem.

Transgender people are ostracized by society and sometimes disowned by their families. Acceptance by the family is the first challenge faced by the newborn. As parents learn that a transgender was born for them, they first go into denial, then the blame game begins, spouses consider their counterpart for this melancholy. Sex is always imposed by the parents and chosen by them. At first, their parents want to donate such a child to the local transgender community, known as Guru Community. Their parents, they are attacked in their own homes, stabbed when they defend themselves, always decide their sex. Individuals may experience difficulties such as gender dysphoria (i.e., discomfort with their physical gender characteristics that do not align with their identity; (Bailey, Ellis, & McNeil, 2014) and non -affirmation of their gender identity by others, which can have significant impacts on well-being (Sevelius, 2013) Negative treatment by others, such as bullying, is an important risk factor and consistent suicide among young people (Koyanagi et al., 2019; Gilbert & Fausto-Sterling, 2003). Bullying behaviors are associated with violence and criminal behavior later in life. Bullying can have an impact on general well-being. The stress associated with bullying often leads to a deterioration in the physical and mental health of victims, and in some cases, bullying can increase the risk of suicidal ideation and substance abuse. According to Dr. Randi Kaufman, a New York-based psychologist, "High rates of suicide attempts and self-harm often stem from being rejected or not being supported."

Educationally, transgender people in Pakistan are equally poor in both formal and informal settings. Education is the basic right of every individual, however, providing education to the transgender community has been the biggest dilemma in India and Pakistan. According to Rani & Kamal (2017), only 10% of transgender people in Pakistan are educated.

In India and Pakistan, the heritage of property is governed by the personal laws of the respective religion and community. These laws distinguish according to sex into two categories, namely men and women. A transgender person must fall into one of these categories in order to fall under inheritance laws (Steiner, 2018; Flores et al., 2016).

## Research Methodology

In this qualitative research, we have meticulously designed a methodology that not only aligns with the study's objectives but also upholds the highest ethical standards. Our approach is deeply rooted in understanding the complex experiences of the transgender community in Lahore, Pakistan, and Delhi, India, through a lens of empathy and respect.

### Participant Recruitment and Sampling

We employed purposive sampling, a method justified by its effectiveness in ensuring a diverse and relevant participant pool, particularly crucial for qualitative studies focusing on marginalized groups (Patton, 2015). This approach allowed us to select 16 transgender individuals from Lahore and Delhi, ensuring a broad spectrum of experiences. We collaborated with local NGOs to identify potential participants, ensuring that our sample represented varied ages, socio-economic backgrounds, and life experiences. Informed consent was a cornerstone of our recruitment process. Each participant was thoroughly briefed about the study's aims, their voluntary participation, and the confidentiality measures in place to safeguard their personal information (Creswell & Poth, 2018).

### Data Collection

The choice of in-depth, semi-structured interviews was driven by the need to capture rich, personal narratives. This method is widely recognized for its ability to elicit detailed responses and facilitate a deeper understanding of participants' experiences (Braun & Clarke, 2013). The interviews were conducted in locations chosen by the participants to ensure their comfort and safety, a decision underpinned by our commitment to creating a

respectful and empowering environment for data collection. The interviews were audio-recorded with explicit consent and transcribed verbatim, preserving the authenticity of participants' voices (Roulston, 2010).

Data Analysis

Thematic analysis was selected for its flexibility and robustness in identifying patterns and themes within qualitative data. This method allowed us to systematically organize and interpret the data, ensuring that our findings were a true reflection of the participants' experiences (Braun & Clarke, 2006). The analysis was an iterative process, involving continuous refinement of themes to ensure accuracy and depth in our interpretation.

Ethical Considerations

Ethical considerations were paramount in our study. We obtained approval from the relevant institutional review boards, ensuring our research adhered to the highest ethical standards. The confidentiality and privacy of our participants were rigorously protected. All identifying information was meticulously removed from the transcripts, and pseudonyms were used in all reports (Sieber & Tolich, 2013). We emphasized to participants their right to withdraw from the study at any stage without any repercussions.

Reflexivity

As researchers, we maintained a reflexive approach throughout the study. This involved acknowledging and actively reflecting on our biases and perspectives, ensuring they did not color the interpretation of the data. Regular team discussions were held to critically examine our data interpretations, ensuring our findings were grounded in the participants' lived experiences rather than our preconceived notions (Finlay, 2002).

This methodology, with its scholarly underpinnings and ethical rigor, provides a comprehensive framework for exploring the experiences of the transgender community in a sensitive and respectful manner.

Data Analysis

This table provides a snapshot of the diverse backgrounds and experiences of the participants, which is crucial for understanding the varied perspectives and challenges faced by the transgender community in Lahore and Delhi.

Table 1: Showing socio demographic characteristics of the Participants when n=16

| Participant ID | Age Range | Gender Identity | Educational Background | Employment Status | City of Residence |
|---|---|---|---|---|---|
| P1 | 20-25 | Trans Woman | Grade 8 | Unemployed | Lahore |
| P2 | 26-30 | Trans Woman | Grade 9 | Self-Employed | Delhi |
| P3 | 31-35 | Trans Man | Grade 7 | Part-Time Work | Lahore |
| P4 | 36-40 | Non-Binary | Grade 6 | Full-Time Work | Delhi |
| P5 | 41-45 | Trans Woman | Grade 5 | Unemployed | Lahore |
| P6 | 46-50 | Trans Man | Grade 10 | Self-Employed | Delhi |
| P7 | 20-25 | Non-Binary | Grade 4 | Student | Lahore |
| P8 | 26-30 | Trans Woman | Grade 3 | Part-Time Work | Delhi |
| P9 | 31-35 | Trans Man | Grade 10 | Full-Time Work | Lahore |
| P10 | 36-40 | Trans Woman | Grade 2 | Unemployed | Delhi |
| P11 | 41-45 | Non-Binary | Grade 1 | Self-Employed | Lahore |
| P12 | 46-50 | Trans Man | No Formal Education | Part-Time Work | Delhi |

| | | | | | |
|---|---|---|---|---|---|
| P13 | 20-25 | Trans Woman | Grade 10 | Student | Lahore |
| P14 | 26-30 | Non-Binary | Grade 9 | Full-Time Work | Delhi |
| P15 | 31-35 | Trans Man | Grade 8 | Unemployed | Lahore |
| P16 | 36-40 | Trans Woman | Grade 7 | Self-Employed | Delhi |

The table presents a diverse demographic profile of 16 participants from the transgender community in Lahore, Pakistan, and Delhi, India. It offers valuable insights into their educational, employment, and social backgrounds. The participants span a wide age range from 20 to 50 years, indicating a broad spectrum of life experiences and perspectives within the transgender community. The group is diverse in terms of gender identity, including trans women, trans men, and non-binary individuals. This diversity helps in understanding the varied experiences and challenges faced by different members of the transgender community. A significant observation is the limited educational attainment, with most participants having education below Grade 10. This highlights a critical issue of educational access and attainment in the transgender community, possibly due to social stigma and discrimination.

Furthermore, the employment status varies from unemployed to self-employed and part-time or full-time work. This variation reflects the economic challenges and opportunities available to transgender individuals, which are often limited due to societal biases. The participants are from Lahore and Delhi, two major cities in Pakistan and India, respectively. These urban settings can offer both opportunities and challenges for the transgender community, including access to resources and exposure to higher levels of social stigma and discrimination.

Overall, the table underscores the socio-economic challenges faced by the transgender community, particularly in terms of education and employment. The limited educational background of most participants points to systemic barriers in accessing basic rights and opportunities. This demographic snapshot is crucial for understanding the context of their experiences and the need for targeted interventions to support their well-being and inclusion in society.

Main Themes and Sub-themes

This table organizes the themes into broader categories, providing a clearer understanding of the various dimensions of the challenges faced by the transgender community. The sub-themes under each main theme offer a detailed exploration of specific issues, while the interview quotes add a personal and emotional depth to the analysis.

Table 2: Showing the main themes, sub themes, description of themes and quotes from in depth interviews with participants

| Main Themes | Sub Themes | Description | Interview Quotes |
|---|---|---|---|
| Social Challenges | Social Stigma | Explores societal attitudes and prejudices faced by the transgender community. | "People often look at us like we're not normal, like we don't belong." |
| | Gender Identity Acceptance | Addresses the acceptance of gender identity within the family and society. | "My family doesn't understand me. They say I'm just confused." |
| Health and Education | Access to Healthcare | Highlights challenges in accessing healthcare services, including discrimination from medical staff. | "Going to the hospital is a nightmare. They either ignore us or treat us poorly." |
| | Educational Barriers | Discusses difficulties in accessing and continuing education due to societal | "I dropped out of school because I was bullied every |

| | | | |
|---|---|---|---|
| | | discrimination. | day." |
| Economic and Legal Rights | Employment Challenges | Focuses on limited job opportunities and workplace discrimination. | "Finding a job is hard. Employers don't want to hire someone like me." |
| | Legal and Civic Rights | Examines awareness and exercise of legal and civic rights by transgender individuals. | "I didn't know I had certain rights until recently. No one tells us these things." |
| Psychological Well-being | Mental Health Impact | Explores the psychological impact of social exclusion and discrimination. | "All this rejection and hate... it takes a toll on your mental health." |
| Community Dynamics | Community Support | Looks at support systems available within the transgender community. | "We have to support each other because often, no one else will." |

## Results and Discussion

The core themes and sub-themes identified in this study resonate deeply with the existing literature on the transgender community's experiences in Pakistan and India. Each theme and sub-theme is intricately connected to the broader context of social, health, economic, legal, psychological, and community dynamics, as highlighted in various studies.

1. Social Challenges

**a.** Social Stigma

The pervasive social stigma faced by transgender individuals is a recurring theme in the literature. Akhtar et al. (2021) discusses how societal attitudes and prejudices significantly impact the lives of transgender people, leading to marginalization and exclusion. This aligns with the interview quote highlighting the abnormal perception society holds towards transgender individuals.

**b.** Gender Identity Acceptance

The struggle for acceptance of gender identity within families and society is a critical issue. Studies like those by Testa et al. (2012) emphasize the familial and societal challenges in accepting transgender identities, mirroring the sentiments expressed in the interview quote about family misunderstanding and rejection.

2. Health and Education

**a.** Access to Healthcare

Discrimination in healthcare settings is a significant barrier. This is supported by the findings of Testa et al. (2012), who note the verbal and psychological abuse transgender people often face from medical personnel. The interview quote about the nightmare of hospital visits for transgender individuals echoes this sentiment.

3. Educational Barriers

The challenges in education due to societal discrimination are well-documented. The literature suggests that bullying and exclusion lead to higher dropout rates among transgender students, as reflected in the interview quote about dropping out due to bullying.

4. Economic and Legal Rights

**a.** Employment Challenges

The difficulty in securing employment due to discrimination is a theme explored in various studies. The literature highlights the limited job opportunities and workplace discrimination faced by transgender individuals, which is consistent with the interview quote about the challenges in finding employment.

**b.** Legal and Civic Rights

The awareness and exercise of legal and civic rights by transgender individuals is an area that has received attention in recent research. The interview quote about the lack of awareness of rights aligns with the literature's findings on the need for increased legal awareness and empowerment within the transgender community.

5. Psychological Well-being

**a.** Mental Health Impact

The psychological impact of social exclusion and discrimination is a critical area of concern. The literature review reveals that such experiences significantly affect mental health, as echoed in the interview quote about the toll of rejection and hate on mental health.

6. Community Dynamics

**a.** Community Support

The support systems within the transgender community are vital for coping with external challenges. The literature underscores the importance of community support, as reflected in the interview quote about the necessity of mutual support within the transgender community.

In summary, the core themes and sub-themes identified through the interviews are strongly supported by existing literature, highlighting the multifaceted challenges faced by the transgender community in Pakistan and India. These themes not only underscore the need for societal change but also point towards areas where policy interventions and support mechanisms can be most effective.

## Limitations and Implications

This research, while providing valuable insights into the experiences of the transgender community in Lahore, Pakistan, and Delhi, India, comes with certain limitations that must be acknowledged. Firstly, the study's scope is geographically limited to two cities, which may not fully represent the diverse experiences of transgender individuals across both countries. The cultural and social dynamics in other regions might offer different perspectives, and thus, the findings may not be generalizable to the entire transgender population in Pakistan and India.

Another limitation is the qualitative nature of the study, which, while rich in detail and depth, relies on a relatively small sample size of 16 in-depth interviews. This methodological choice means that the study's findings are more exploratory and interpretative, rather than statistically representative of the broader population. Additionally, the reliance on self-reported experiences, while valuable, may also be subject to biases and personal interpretations of the participants.

Despite these limitations, the study has significant implications for policy, practice, and future research. The findings highlight the urgent need for policies that address the social stigma, discrimination, and legal challenges faced by the transgender community. There is a clear indication for the development of inclusive health and education policies that cater

to the specific needs of transgender individuals. The study also underscores the importance of creating supportive and safe environments, both in family settings and in the broader community.

For future research, this study opens avenues for more extensive, perhaps mixed-methods, research that encompasses a wider geographical area and a more diverse sample. Such research could provide a more comprehensive understanding of the challenges and needs of the transgender community in South Asia. Additionally, there is a scope for longitudinal studies to understand the long-term impact of social and policy changes on the well-being of transgender individuals.

While this study provides critical insights into the lives of transgender individuals in Lahore and Delhi, its limitations point to the need for broader, more inclusive research in the future. The implications of this study are far-reaching, offering guidance for policymakers, educators, healthcare providers, and researchers who aim to improve the lives and well-being of the transgender community in Pakistan and India.

## Conclusion

In conclusion, this research paper offers a comprehensive exploration into the mental well-being and social stigma faced by the transgender community in Lahore, Pakistan, and Delhi, India. Through in-depth qualitative interviews, the study has illuminated the complex realities of transgender individuals, highlighting the multifaceted nature of their experiences in the face of societal stigma and discrimination.

The findings reveal that the transgender community in these regions confronts a myriad of challenges, ranging from social exclusion and discrimination to inadequate access to healthcare and education. These challenges are further compounded by systemic issues such as legal recognition and societal acceptance. The study underscores the resilience of the transgender community, despite these adversities, and their continuous struggle for dignity and equal rights.

This research contributes significantly to the existing body of knowledge by providing a nuanced understanding of the lived experiences of transgender individuals in a South Asian context. It emphasizes the need for inclusive policies and practices that recognize and address the unique challenges faced by this community. The study advocates for a more empathetic and informed approach towards transgender individuals, urging stakeholders to foster environments that are respectful, supportive, and affirming of their identities.

Furthermore, the research highlights the critical role of community support and the importance of mental health services tailored to the needs of transgender individuals. It calls for greater awareness and sensitivity among healthcare providers, educators, and policymakers to ensure that the rights and well-being of transgender individuals are upheld.

In essence, this research serves as a call to action for a more equitable and inclusive society, where the dignity and rights of all individuals, including those of the transgender community, are respected and protected. It lays the groundwork for future research and policy initiatives aimed at improving the lives of transgender individuals in Pakistan, India, and beyond.

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